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Fax No. 513-627-0260

Phone No. 513-627-0352

Application No.: 10/695,282

Inventor(s): Dykstra et al.

Filed: October 28, 2003

Docket No.: 9083M&

Confirmation No.: 3958

Customer No.: 27752

FACSIMILE TRANSMITTAL SHEET AND**CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8**

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Carolue Wei Berk (Signature)

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- 1) Response (8 pages)
- 2) Fee transmittal for one month extension
- 3)
- 4)
- 5)

Number of Pages Including this Page:

Comments:

FEE TRANSMITTAL for FY 2006 Patent fees are subject to annual revision. Effective December 8, 2004	Complete if Known	
	Application Number	10/695,282
	Confirmation Number	3958 RECEIVED
	Filing Date	Oct. 28, 2003 CENTRAL FAX CENTER
	First Named Inventor	Glenn Jordan IV JUL 05 2006
	Examiner Name	John Hardee
	Art Unit	1751
TOTAL AMOUNT OF PAYMENT (\$120.00)		Docket No. 9083M&

METHOD OF PAYMENT		FEE CALCULATION (continued)																																														
1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to: Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company		5. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Fee Description</th> <th></th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1st month</td> <td>(\$120)</td> <td>[120.00]</td> </tr> <tr> <td>Extension for reply within 2nd month</td> <td>(\$450)</td> <td>[]</td> </tr> <tr> <td>Extension for reply within 3rd month</td> <td>(\$1,020)</td> <td>[]</td> </tr> <tr> <td>Extension for reply within 4th month</td> <td>(\$1,590)</td> <td>[]</td> </tr> <tr> <td>Extension for reply within 5th month</td> <td>(\$2,160)</td> <td>[]</td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td>(\$180)</td> <td>[]</td> </tr> <tr> <td>37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)</td> <td>(\$130)</td> <td>[]</td> </tr> <tr> <td>37 CFR 1.17 (q) Surcharge - Late provisional filing fee or cover sheet</td> <td>(\$50)</td> <td>[]</td> </tr> <tr> <td>Non-English specification</td> <td>(\$130)</td> <td>[]</td> </tr> <tr> <td>Notice of Appeal</td> <td>(\$500)</td> <td>[]</td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td>(\$500)</td> <td>[]</td> </tr> <tr> <td>Request for oral hearing</td> <td>(\$1,000)</td> <td>[]</td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td>(\$1,370)</td> <td>[]</td> </tr> <tr> <td>Other:</td> <td></td> <td>[]</td> </tr> </tbody> </table>		Fee Description		Fee Paid	Extension for reply within 1 st month	(\$120)	[120.00]	Extension for reply within 2 nd month	(\$450)	[]	Extension for reply within 3 rd month	(\$1,020)	[]	Extension for reply within 4 th month	(\$1,590)	[]	Extension for reply within 5 th month	(\$2,160)	[]	Information Disclosure Statement fee	(\$180)	[]	37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)	(\$130)	[]	37 CFR 1.17 (q) Surcharge - Late provisional filing fee or cover sheet	(\$50)	[]	Non-English specification	(\$130)	[]	Notice of Appeal	(\$500)	[]	Filing a brief in support of an appeal	(\$500)	[]	Request for oral hearing	(\$1,000)	[]	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370)	[]	Other:		[]
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3. APPLICATION SIZE FEE: Sheets of Spec and Drawings [] (\$250 for each 50 sheets in excess of 100, except for sequence and program listings) SUBTOTAL (2)+(3) (\$)[]																																																
4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE: <table border="1"> <thead> <tr> <th></th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims [] - 20** = [] x</td> <td></td> <td>[] =</td> <td>[]</td> </tr> <tr> <td>Independent Claims [] - 3** = [] x</td> <td></td> <td>[] =</td> <td>[]</td> </tr> <tr> <td>Multiple Dependent claims:</td> <td></td> <td>[] =</td> <td>[]</td> </tr> </tbody> </table> ** or number previously paid, if greater; For Reissues, see below Fee Description Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) **Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent (\$50 per claim) SUBTOTAL (4) (\$)[]			Extra Claims	Fee from Below	Fee Paid	Total Claims [] - 20** = [] x		[] =	[]	Independent Claims [] - 3** = [] x		[] =	[]	Multiple Dependent claims:		[] =	[]	SUBTOTAL(5) (\$) [120.00]																														
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Caroline Wei-Berk	Registration No. (Attorney/Agent)	45,203
Signature	<i>Caroline Wei-Berk</i>	Telephone	(513) 627-0352
		Date	July 5, 2006

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JUL-05-2006 12:22

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513 627 0260 P.03/11

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